U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

S Rec'd

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

Ms Drive	
1. File Number U - 6966	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Frank D Schembre	Name Cement Masons Union Local #527
	Labor Organization File Number 011-759
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 5004 Bancroft	Street 3341 Hollenberg Drive
City St.Louis	City Bridgeton
State Missouri ZIP Code.+4 63109	State Missouri ZIP Code + 4 63044
5. Position in labor organization. Business Manager	
A. Held an interest in, engaged in transactions (including loans) with	or derived income or other economic benefit of
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organize	or derived income or other economic benefit of
A. Held an interest in, engaged in transactions (including loans) with	or derived income or other economic benefit of cation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organiz 8. Name and address of Employer (including trade name, if any).	or derived income or other economic benefit of cation represents or is actively seeking to represent.
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organize. 6. Name and address of Employer (including trade name, if any). Name N / A	or derived income or other economic benefit of reation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. N / A
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organize. 6. Name and address of Employer (including trade name, if any). Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any	or derived income or other economic benefit of cation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organiz 6. Name and address of Employer (including trade name, if any). Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	or derived income or other economic benefit of reation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. N / A
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organize. 6. Name and address of Employer (including trade name, if any). Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any	or derived income or other economic benefit of tation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. N / A 7.b. Amount.
A. I-feld an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organiz 6. Name and address of Employer (including trade name, if any). Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	or derived income or other economic benefit of tation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. N / A 7.b. Amount.
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organize. 6. Name and address of Employer (including trade name, if any). Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1990, 200, 100, 100, 100, 100, 100, 100, 10	or derived income or other economic benefit of tation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. N / A 7.b. Amount.
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organiz 6. Name and address of Employer (including trade name, if any). Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 290. City Surplant 230. State ZIP Code + 4 S 15. Signature and verification. The undersigned declares, under penalty	or derived income or other economic benefit of cation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. N / A 7.b. Amount. ignature of Perjury and other applicable penalties of the law, that all of the information anying documents), has been examined by the signatory and is, to the best of the
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organize. 6. Name and address of Employer (including trade name, if any). Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street State ZIP Code + 4 S 15. Signature and verification. The undersigned declares, under penalty submitted in this report (including the information contained in any accomp	or derived income or other economic benefit of cation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. N / A 7.b. Amount. ignature of Perjury and other applicable penalties of the law, that all of the information anying documents), has been examined by the signatory and is, to the best of the

Name of Person Filing Frank Schembre	File Number U -						
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherwof an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or ind dealing with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to, or otherwise						
8. Name and address of Business (including trade name, if any). Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	9. Business deals with: a. Labor Organization b. Trust c. Employer						
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	monther than the control of the cont					
Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any	N / A						
Street	11.b. Approximate dollar value of such dealing.	\$0					
City	12.a. Nature of interest held or income received.						
State ZIP Code + 4	N / A						
	12.b. Amount.	\$0					
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.							
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.						
Name The Commerce Trust Company	3/6/2004 4 Family Arena Hockey Game Tick	sets					
Trade Name, if any:		production of the state of the					
P.O. Box, Bldg., Room No., if any		occommentation					
Street 8000 Forsyth Boulevard		to the state of th					
City St.Louis		Reproduce Processing					
State Missouri ZIP Code + 4 63105							
13.b. Is the Business an Employer 💢 or Consultant 🧧 ?	14.b. Amount of payment.	\$40					

Name of Person Filing	File Number U-	
Name of Person Filing Frank Schembre	i lie ivallibei 0-	

Part C Continuation Page

	<u> </u>	
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant	to an employer any
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	mas the Angel Angel Angel Angel and a second of the Angel
Name Group Health Plan	4/5/2004	n-mprince-optimates
Trade Name, if any:	1 Party Room St.Louis Cardinal and Food	Baseball Ticket
P.O. Box, Bldg., Room No., if any Suite 400		A disconnection of the
Street 111 Corporate Office Drive		Transconstruction of the Contract of the Contr
City Earth City		Remove reasons and the second
State Missouri ZIP Code + 4 63045		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	\$151
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant (to an employer any
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name The Commerce Trust Company	4/28/2004	
Trade Name, if any:	2 Club Room St.Louis Cardinal B Food and Plaque	aseball Tickets,
P.O. Box, Bldg., Room No., if any		
Street 8000 Forsyth Boulevard		**************************************
City St. Louis		menderativas salays
State Missouri ZIP Code + 4 63105		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	\$217
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant t	to an employer any
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name SEI Investments	4/28/2004	
Trade Name, if any:	Golf - Greens Fees, Food and Ap	pparel
P.O. Box, Bldg., Room No., if any		der obnitation on one
Street One Freedom Valley Drive		w dans conjugações
City Oaks		recipe debidicipal
State Pennsylvania ZIP Code + 4 19456		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	\$175

Name of Person Filing	Frank	Schembre			Number U-	

Part C Continuation Page

1 are 5 conta		
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant	to an employer any
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	tt Karpin als Anathara ing mengangan at tanggan at tanggan at tanggan at tanggan at tanggan at tanggan at tang
Name Group Health Plan	5/20/2004	por addition to the state of th
Trade Name, if any:	Golf - Greens Fees and Food	MITDO-ANIAS Y VANO
P.O. Box, Bldg., Room No., if any Suite 400		on Lifetimental Control of the Contr
Street 111 Corporate Valley Drive		Many to another section of the secti
City Earth City		The first office of the second
State Missouri ZIP Code + 4 63045		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	\$85
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant	to an employer any
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.	·
Name The Commerce Trust Company	6/5/2004	na richardan
Trade Name, if any:	Golf - 2 Greens Fees	
P.O. Box, Bldg., Room No., if any		in the second se
Street 8000 Forsyth Boulevard		Address of the Control of the Contro
City St. Louis		in valendarien en
State Missouri ZIP Code + 4 63105		
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment.	\$160
C. Received from any employer (other than an employer covered under parts A	and B above) or from any labor relations consultant	to an employer any
payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		a or in investigation of the control
Trade Name, if any:		Proposition of the second seco
P.O. Box, Bldg., Room No., if any		te version (Constitution of the Constitution o
Street		provide allowables
City (desirence and
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	